

NOTICE OF FEE DUE

DATE: 01-17-02

TO: Director

FROM: Office of Initial Patent Examination

SUBJECT: Fee Due

APPLICATION NUMBER: 09846,779

A fee is due for the attached document submitted to the U. S. Patent and Trademark Office for the following reason. Please check the application for the appropriate authorization to charge a deposit account. If an authorization is present, please charge the appropriate fee. If an authorization is not present, notify the applicant of the fee deficiency.

☐ Insufficient fee by check

☒ Insufficient funds in deposit account

☐ Declined credit card

☐ Non authorization for charge to deposit account

☐ No fee submitted per requirement

The correct fee code: 215 amount \$ 55

The suspended fee code: 197 amount - \$

Fee Due amount =\$

If you have any questions, please contact Cynthia Streater at 703-306-5430 or Eleanor Kurtz at 703-308-3642.

Terminal Operator

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Deposit Account

Print Screen

Number: 501803

Balance Amount: 8.00

Holder

Name: SYN X PHARMA INC



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Province:

City:

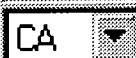
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905-677-1944

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5994

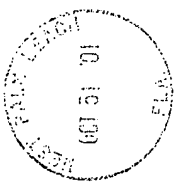
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☐ Closed

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01/18/2002

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